

February 12, 111 Saturday 16 Adar 3871 19:31 IST [print](#) [Back to original article](#)

THE JERUSALEM POST

JPOST.com

Israel's best-selling English daily and most-read English website



Photo by: Ariel Jerozolinski

Health services will soon speak your language

By JUDY SIEGEL-ITZKOVICH
08/02/2011

New ministry directives require translation into English, Arabic, Russian and Amharic.

If you speak English, Arabic or Russian and are confounded by forms and other documents and services in the health system that appear only in Hebrew, relief will come, gradually, within two years.

Health Ministry director-general Dr. Ronni Gamzu, adopting the ideal of “cultural competence” that has become the rule in the US and many other countries, issued a directive on Monday explaining new language requirements for the health system.

Signs in every institution will have to appear in English and Arabic as well as Hebrew (but not in Russian and Amharic). Some of the required forms and signs will be translated into Amharic for Ethiopian immigrants as well, according to the seven-page directive, which has been published (in Hebrew only) on the ministry’s website at www.health.gov.il. The documents must be not only translated, but also suited to the respective culture of the people who speak the language.

“There is no doubt that coping with different cultures and languages is one of the most important challenges faced by the health system,” Gamzu said.

Among the documents are forms for payment, rights of patients, information on violence in the family, informed consent before undergoing treatments and surgery, health promotion and disease prevention. Websites of the health funds and other service providers will have to be translated into the other languages as well.

The director-general added that medical staffers who were in contact with people from lingual and cultural minorities would have to undergo special training to familiarize themselves with the people’s languages and backgrounds so they could communicate with them.

The National Health Insurance Law of 1994, which sets down the right to universal access to services and a proper standard of care for all Israeli residents, is the basis for establishing cultural competency, Gamzu said.

The requirements will be in effect not only in hospitals, but also in health fund clinics and public health facilities such as well-baby (tipat halav) stations.

Translations will be supplemented by medical interpreters or foreignlanguage speakers and immigrants called “bridgers,” who can translate over the phone in real time what a doctor or nurse says in Hebrew into other languages, and vice versa for the patient. Information services must provide someone who can communicate over the telephone in the other languages within 24 hours of requests, the directive says.

A family member (including a child) may not be used to interpret medical information, it reads.

Magen David Adom, health fund information numbers and other services will be required to provide immediate responses in all five languages, Gamzu said. He said that the health system must invest time and money in the study of cultural differences among different populations and their attitudes toward healthcare.

Meanwhile Monday, the Knesset Labor, Social Affairs and Health Committee approved for second and third reading a private member's bill under which the first payment for a general practitioner, family physician, specialist, institute or referral form would be determined from the patient's first visit and not automatically from the beginning of every quarter.

The bill, initiated by MKs Moshe Gafni (United Torah Judaism), Uri Maklev (UTJ), Eitan Cabel (Labor) and David Azoulay (Shas), states that this is important because people are required to make copayments for some services every quarter. If they see a doctor during the last month of a quarter, they have to pay again at their next visit in the beginning of the next quarter. This situation would change with the new law.

The bill would also set a ceiling of between NIS 140 and NIS 200 per month for copayments per family.

Any excess would be returned by the health fund without the members making requests for reimbursement.

Although representatives of the insurers opposed the bill, saying it would take a long time to prepare for implementation, committee chairman Haim Katz (Likud) said that the debate over the idea had gone on through several Knessets, and the health funds had had time to get used to the idea.

In another month, the insurers will be able to appear at another session to present alternatives for situations that cause technical difficulties, Katz said.

Also Monday, the High Court of Justice ordered the government to reply within 30 days how it would allocate new general/internal medicine and intensive care beds and manpower in the hospital system.

The ruling was handed down following a petition by the Israel Medical Association, which wanted to know what criteria would be used in adding nearly 1,000 beds plus medical professionals within five years.

One justice said the ministry was not doing enough to expand hospital services to keep up with the growth and aging of the population.



Print



Back to original article

[About Us](#) | [Advertise with Us](#) | [Subscribe](#) | [RSS](#)

All rights reserved © 1995 - 2009 The Jerusalem Post.

כל הזכויות שמורות © 2009- נט אפיקי תקשורת אינטר מדיה בע"מ